



LOCAL HELP FOR PEOPLE WITH MEDICARE

SHIP's

Log

*Your Health Insurance
Counseling Newsletter*

Winter 2011

SHIP - Indiana Department of Insurance, 714 W. 53rd Street, Anderson, IN 46013

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To comment on this edition or submit articles or information for future editions, contact Sarah Reimmuth 765-610-3873 or email: sarahship@thenewcreative.com.

Director's Helm

By: Cheryl St. Clair, SHIP State Director

Making Headway!

I don't know about you, but I found the new dates for the Open Enrollment Period just went by too quickly. Even though there was an additional week for the new OEP, I'm not sure that everyone who wanted to make a change to their MA or PDP did. I'm guessing that some people were not aware of the change and think they have until the end of the year. If you do have any cases of someone missing the December 7th deadline, please have your client call 1-800-MEDICARE. There may be a Special Enrollment Period (SEP) available. As with all the changes we've gone through with Medicare, there usually is an adjustment period.

Many local SHIP sites sponsored Open Enrollment events this year. I know that people with Medicare greatly benefit from having a one-on-one counseling session during this time when the decision-making process is overwhelming. From October 15 through December 7, we have had 143 presentations and local enrollment events scheduled throughout the State. This is over twice as many events as last year. Our call volume on the SHIP 800 helpline also dramatically increased each week, and many of you assisted with the extra calls. Your help with call backs was greatly appreciated.

I attended most of the SHIP Local Coordinator's Meetings before the OEP began. I asked the Local Coordinators to really push to get Client Contact and PAM forms submitted on a timely basis. I know that most of you don't volunteer so that you can do lots of paperwork; your heart is with helping people with Medicare find the best health and drug coverage for their own situation. However, it is important that you complete a CC form for every client you talk to and a PAM form for every presentation or event that you attend. If your activities are not documented on these forms, it is as if you didn't provide the service at all. I know how hard you all have worked so fill out those forms so that we get the recognition (and funding) we deserve.

Now that the OEP is over, I hope that you feel a sense of accomplishment. For the Medicare beneficiaries that you help, your help makes a difference. It will help them through this next year with their health care and drug costs. Your assistance has a true impact on their day-to-day lives during these tough economic times. I hope that for this New Year that all of you understand how important you are to your local community. I thank you all for the tremendous effort you've put forth and send my best wishes for a great New Year.

National Blood Donor Month

As January is National Blood Donor Month, let's look at how Medicare provides coverage for blood.

Coverage for blood under Medicare Part A

In most cases, the hospital gets blood from a blood bank at no charge, and the Medicare beneficiary will not have to pay for nor replace the blood. If the hospital has to buy blood for the beneficiary, the beneficiary must either pay the hospital costs for the first 3 units of blood in the calendar year, or have the blood donated.

Coverage for blood under Medicare Part B

In most cases, the provider gets blood from a blood bank at no charge, and the beneficiary will not have to pay for nor replace the blood. However, the beneficiary will pay a coinsurance for the blood processing and handling services for every unit of blood they receive – the Part B deductible applies.

If the provider has to buy blood, the beneficiary must either pay the provider costs for the first 3 units of blood received in a calendar year or have the blood donated by the beneficiary or someone else. Beneficiaries pay a coinsurance for additional units of blood, after the first 3 units – the Part B deductible applies.

Health Observances

January

National Blood Donor Awareness Month
Cervical Health Awareness Month
National Glaucoma Awareness Month
Thyroid Awareness Month
National Birth Defects Prevention Month
National Radon
Action Month



February

AMD/ Low Vision Awareness Month
American Heart Month
National Wise Health Consumer Month
National Children's Dental Health Month

March

National Colorectal Cancer Awareness Month
National Endometriosis Awareness Month
National Nutrition Month
Save Your Vision Month
Trisomy Awareness Month
Workplace Eye Wellness Month

Medicare Part B Coverage for Outpatient Mental Health Services

What does Medicare cover?

Medicare Part B helps cover outpatient mental health services. This includes services that are usually provided outside a hospital (like in a clinic, doctor's or therapist's office), and those provided in a hospital's outpatient department. Medicare helps cover the following services:

- Individual and group psychotherapy with doctors or certain other licensed professionals
- Family counseling if the main purpose is to help with the Medicare beneficiary's treatment
- Testing to find out if the beneficiary is getting the services they need and/or if their current treatment is helping
- Psychiatric evaluation
- Medication management
- Occupational therapy that's part of the mental health treatment
- Individual patient training and education about their condition
- Diagnostic tests
- Screening for depression during the "Welcome to Medicare" physical exam
- Partial hospitalization may be covered (if the services are received in a hospital clinic or hospital outpatient department, the beneficiary may have to pay an additional co-insurance amount to the hospital)

What does the beneficiary pay?

After the annual Medicare Part B deductible (\$140 for 2012), how much a Medicare beneficiary will pay for mental health services depends on whether the purpose of the visit is to diagnose the condition or to get treatment. For visits to a doctor or other health care provider to diagnose the condition, the beneficiary will pay 20% of the Medicare-approved amount. For outpatient treatment of the condition, the beneficiary will pay a higher co-insurance until 2014. In 2008, Congress passed legislation to increase Medicare's payment for outpatient mental health services as follows:

In the year	Beneficiary's co-insurance
2009 and before	50%
2010 and 2011	45%
2012	40%
2013	35%
2014	0%

It pays to do the math.

Barb Kaster

Barb Kaster, SHIP counselor at Hancock Regional Hospital in Greenfield, has been a counselor since 2005. “Since the beginning of the site,” Barb says. Barb says her favorite thing about being a SHIP counselor is “The feeling that I can help people to understand things better and to save them money.”

Recently, Barb has helped two clients with cases that really stood out when it came to the realization of the clients’ ultimate savings.

The first case was a woman who has full LIS. She takes six prescription medications. Only one of the medications is a generic. Generics are not available for the others. Two of those medications are very expensive: Pulmicort at \$169/month and Suboxone at \$528/month at full cost.

Only one Advantage plan for her geographical area covers all of her medication. With that Advantage Plan, it would cost her \$252 for drug costs in 2012. With the other plans, she would have been paying from \$2,293 to up to \$9,098 for her drug costs.

A person on the same medications withOUT full LIS would pay \$3,375 for the Advantage Plan covering all of the medications and from \$5,638 to \$11,335 on the other plans.

What a huge savings!

With the second case, a woman is dual eligible. She had said she could not afford her medications. Her list of 8 medications includes two generics and two without available generics. The medicare.gov website displays the Part D Plan she is currently on will cost \$12,193 in 2012. The least expensive plan for these medications would be \$5,534.

If the four brand name drugs can be replaced by their generics, the least expensive Part D Plan for her will be \$355. Her current plan would be \$4,856. Obviously, she plans to ask her doctor for generics and to change plans!

Barb said, “I thought I had seen dramatic price differences in the past, but these two cases blew my mind!” When I asked Barb how long she plans to be a SHIP counselor, she replied “as long as I am able to.”

For that, Barb, we are very glad. Thank you for your service to SHIP.

SHIP Counselor Q & A

Sandy Lanoue, Local Coordinator, SHIP Counselor from Jasper County Hospital, Rensselaer, IN, had the following question. Her Area Manager, Christel Snow, submitted it to Counselor 411, Mary Philips, by email. Keep reading to find out Mary's answer!

Hi Mary,

Sandy, Jasper County Hospital, has a client that deferred Medicare Part B and D because he has his deceased wife's COBRA insurance. He would like to sign up for Medicare Part B in the next enrollment period (Jan to March 2012) effective 7/1/2012. He cannot enroll in Medicare Part D at this time because it would cancel out the retiree COBRA policy for health benefits. (He only has Medicare Part A).

Will the client be able to sign up for Medicare Part D when he disenrolls from the COBRA coverage effective 7/1/2012? He will incur all penalties for not taking Medicare Part B and D when he was first eligible. COBRA is not considered credible coverage, the client already understands this part.

Hi, Christel.

Part B: The client will be subject to a late enrollment penalty for the time he was no longer covered by the employer group health plan due to active employment, until his Medicare Part B is effective.

Part D: COBRA coverage is treated differently in dealing with Part D than it is for Part B. When dealing with Part D, we are looking for creditable coverage - it does not have to be attached to an employer group health plan and/or active employment. If the coverage, regardless of the source, is as good as or better than Medicare Part D, it is considered creditable coverage.

What we need to know is - is his current prescription coverage considered creditable coverage? If it is, then he may not be subject to a late enrollment penalty. If his is considered creditable, then he would also be eligible for a special enrollment period (SEP) when his COBRA ends. He will probably need to provide the drug plan proof of coverage in order to enroll. Here is the Tipsheet Understanding Medicare Enrollment Periods, there is a lot of good information about SEPs in this document. <http://www.medicare.gov/Publications/Pubs/pdf/11219.pdf>

If the current prescription coverage is not creditable, he would not be eligible for the special enrollment period and would probably have to wait until the end of the year to enroll for 2013. He would also be subject to the late enrollment penalty.

- Mary



Mary Philips,
Counselor Assistance Program and Training

Do you have a tough question and can't get a hold of your Area Manager? Now you have another option - SHIP Counselor 411. Email your questions to SHIPcounselor411@gmail.com

SHIP Event Photos



LifeSpan Resources in Scottsburg has a brand new office! The southeastern Indiana's SHIP counselors held an Open Enrollment Event on November 2. Left: Dale and Rosemarie Hobbs, Scottsburg, learn about their Part D options for 2012 from Carol Kimberlin, a recent retiree and SHIP counselor who returned to assist for the event.



On November 2 and 3, Butler University and Community Hospitals in Indianapolis partnered with SHIP and Social Security to provide two full days of Medicare counseling at the Community Medical Pavilion. Pharmacy students from Butler ran drug plan comparisons. SHIP staff and SHIP counselors from CICOA acted as consultants and helped clients enroll in the lower income programs. SSA provided resources and assistance to participants.

SHIP Event Photos

On November 22nd, SHIP, SMP and CICOA held an Open Enrollment event at the Indianapolis Senior Center. SMP provided a lunch that was enjoyed by all. Staff from all three agencies provided individual counseling to many interested Medicare beneficiaries.

Right: Abigail Vivo provides assistance. (Below: Counselors helping clients in the ISC's computer lab.



In another joint effort by CICOA, SHIP and SMP assisted many residents of Rosewalk Assisted Living on November 4. Many of the attendees were assisted with Part D plan comparisons. Many thanks to CICOA staff/SHIP counselor Abby Vivo, SMP staff/SHIP counselor Tamra Simpson, and SHIP Volunteer Becky Baker for being available for counseling. SHIP volunteer Becky Baker (left) shares a lighthearted moment with a Rosewalk resident.

Area Managers' Updates



Nannie Alldredge,
Southern Area Update

I would like to thank everyone who has worked so hard during this year's Medicare Open Enrollment. With the changes in dates for open enrollment, I believe it was one of our busiest years. Your hard work and dedication is what makes SHIP a wonderful resource for people with Medicare here in Indiana.

I would like to welcome our newest SHIP volunteers who completed training and began their service during open enrollment. Patrick Stephen who volunteers at Aging and Community Services of South Central Indiana in Columbus. John Sage who volunteers at IU Health Paoli Hospital in Paoli. Vera Hall who works for Hoosier Uplands in Mitchell. Gwen Voyles, Deb Noe and Dawn Sanders who work for LifeSpan Resources in Scottsburg. I would also like to welcome back Cathy Smiley who is once again volunteering with SHIP.

Hoping everyone has a wonderful new year in 2012.



Twyla Stech,
Central/Northeast Area Update

Central/Northeast Local Coordinators and Counselors, Thank you! Thank you! In the month of November you handled over 200 callbacks! Many of your local offices hosted enrollment events or Part D educational seminars, and all of you with whom I have met so far under "Reconstruction" have considered the five client contact/PAM forms per calendar quarter submission to be a more than reasonable goal. Many of you have doubled that commitment!

During December, I will be talking with the remaining sites' Local Coordinators and will also be scheduling some new counselor trainings. LCs, please let me know if you have a "prospect" waiting to be trained. And please encourage your new counselors to return their Mentoring Check Lists to me as soon as they are completed.

You can all email Santa and let him know he need not risk singeing his whiskers squeezing down your chimney as you have already received the best gift of all--the knowledge that through SHIP counseling you have forever made a positive difference in someone's life! Happy Holidays!

Area Managers' Updates



Christel Snow,

Northern Indiana Area Update

A big thank you to all our SHIP Counselors and local coordinators who worked so hard during this successful Annual Enrollment Period. Your dedication and hard work is inspiring! Thank you to all my sites for taking over 100 call backs from the SHIP toll free assistance line during November alone. Your persistence and diligent work never ceases to amaze me, thank you again for making 2011 another successful year for the SHIP program.

New counselor trainings are scheduled for January, and we are looking forward to welcoming our new counselors! Below is a schedule for New Counselor Training in January 2012:

Area 4 Agency on Aging on Community Action Programs, 660 N 36th Street, Lafayette, IN, 47903

10AM to 4PM (EST)

January 6,13,20,27 and February 3, 2012

Area 2 Real Services, 1151 S Michigan Street, South Bend, IN, 46634

9:30AM to 3:30PM (EST)

January 9,10,11,12,13, 2012

Wabash County Council On Aging, 239 Bond Street, Wabash, IN, 46992

10AM to 4:00PM

January 5,6,18,19,20, 2012

Once again, thank you for all of your hard work and dedication to the SHIP program this year. I look forward to working with you in the New Year!

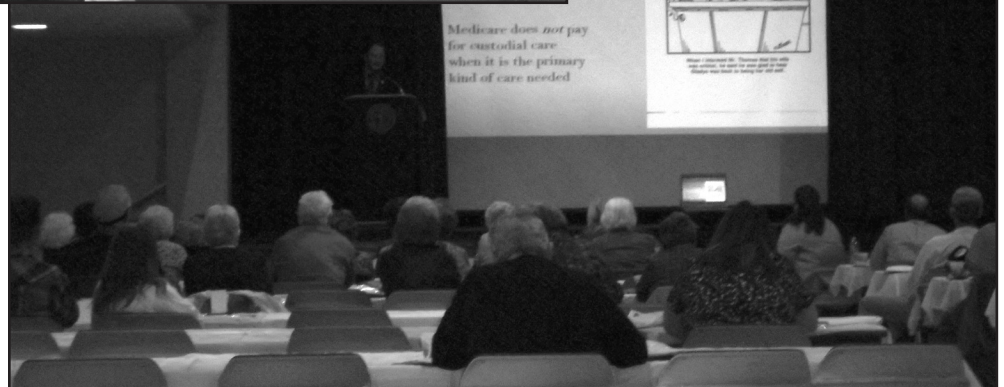
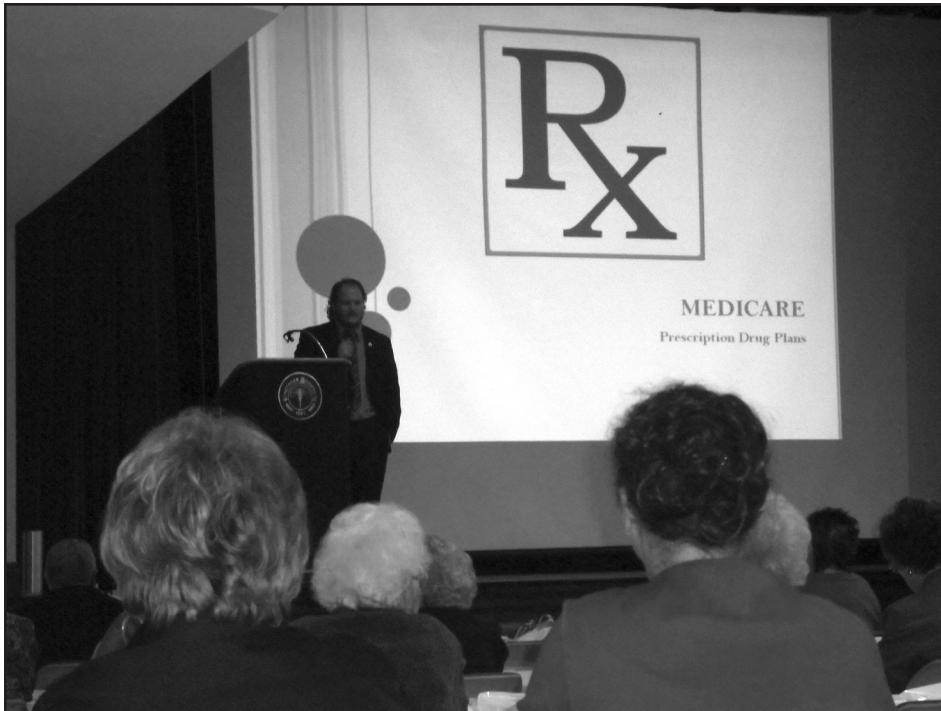
Bon Voyage to SHIP Counselor Jayne Gyure.

written by Christel Snow, Area Manager

Janye completed her SHIP Counselor training in 1995, she was recruited by fellow SHIP Counselor Bill Preston. Bill and Jayne are SHIP Counselors at St. Margaret Mercy Health Centers in Hammond, IN.

Jayne Gyure is a retired School City of Hammond Physical Education teacher. Janye was one my first SHIP mentors, when I became a new counselor, she taught me how to chart client's statements and claims. Jayne will be missed not only by me, but by her clients, the hospital and the community she has always served.

Open Enrollment Celebration and Information Day at Generations



Many exhibitors, delicious complimentary breakfast and lunch, hard-working SHIP counselors and Generations staff, great

presentations... These were some of the highlights of an Open Enrollment Workshop held by Generations, the Area Agency on Aging in Vincennes on October 25th. Josh and Ashley Seprodi, SHIP counselors and Generations staff with additional full-time job responsibilities, organized an eventful day with the goal of educating Medicare beneficiaries about their options during Open Enrollment, low income programs, resources in the community, and Medicare in general.

The turnout was terrific and the attendees reported that they were delighted with the day. Many thanks to the Seprodies and the Generations staff for putting on this wonderful event!

SHIP Counselors:

Have you helped a client with a tricky situation? Let us (and everyone else) know how it was resolved. Contact me with the details at sarahship@thenewcreative.com.

Awards Given at Local Coordinators Meeting

(right) During a Local Coordinators' meeting on October 27, Twyla Stech, Central/Northeast Area Manager was awarded the "True Blue" Award at the Marten House in Indianapolis.

(below) Also honored at the meeting was Burdellis Carter, SHIP Counselor at Robin Run Village, for 15 years of SHIP service.



Do you have photos from a recent event to share?
Send them to me
for the next SHIP Log!
sarahship@thenewcreative.com
or call at (765) 610-3873.

LOSING DEEMED STATUS FOR LIS IN JANUARY?

We get lots of calls every January from people with the Low-Income Subsidy (LIS) for their Part D drugs who go to the pharmacy and panic when they are charged the full co-pays and deductible for their prescription plan. Most often, this person received a gray letter from the Centers for Medicare & Medicaid Services (CMS) in November that stated they no longer automatically qualified for Extra Help as of January 1, 2012. Their letter instructed them to re-apply with Social Security or contact their local Medicaid office. Sometimes they just don't understand the letter or don't understand the implications if they don't re-apply.

It may be that they became eligible for LIS in 2011 because they met a Medicaid spend-down due to a hospitalization or other large medical expense. If this is the case, they won't qualify immediately when they re-apply because their income may be too high. They will have to meet their spend-down again for at least one month before they will have LIS again for the rest of the year. The "snap shot" of who automatically re-qualifies is taken in July. That means if they meet their Medicaid spend-down in July (or newly qualified afterwards), they would be eligible for LIS for the rest of the current year and the entire next year. Every January they will need to re-qualify unless they've re-qualified since the previous July or have had their income decrease to LIS qualifications.

LIS/MSP Figures for 2012

The 2012 resource limits are \$8,440 (\$13,410 if married) for the full low-income subsidy and \$13,070 (\$26,120 if married) for partial low-income subsidies. These resource limits include \$1,500 per person in resources that are used for burial expenses. CMS will release the 2012 income standards for the LIS and MSP in early 2012 (February maybe) after the release of the 2012 Federal poverty lines (FPL).